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APPLICANTS

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** CONTINUING DATA ***** *Nae*

** FOREIGN APPLICATIONS ***** *Nae*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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|---|---------------------------|------------------------|--------------------------|----------------------------|
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>Deborah Williams</i> Examiner's Signature | STATE OR COUNTRY CA | SHEETS DRAWING 4 | TOTAL CLAIMS 16/15 | INDEPENDENT CLAIMS 4 |
|---|---------------------------|------------------------|--------------------------|----------------------------|

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TITLE
 Clocked D/A converter

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| FILING FEE RECEIVED 986 | FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following: | <input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ |
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